

THE BIRTHS AND DEATHS REGISTRATION ACT (Cap. 149)

ACKNOWLEDGEMENT OF BIRTH NOTIFICATION (FOR PARENTS)

Serial No. BI AB 2654026

1. NAME LLOYD MUMO KIDKO 2. DATE OF BIRTH 23 3 22
 First name Middle Name Father's name† Day Month Year

3. SEX* Male Female 4. TYPE OF BIRTH* Single Twin OTHER, SPECIFY _____ 5. NATURE OF BIRTH* Born Alive Born Dead

7. PLACE OF BIRTH KCRH / Kurinyaga center
 Sub-location or Estate and Town or health institution Sub-County

8. NAME OF MOTHER FAITH NYAWIRA MURITHI
 First name Middle name Father's name

NOTIFICATION ISSUED TO Faith Nyawira Muriithi ID No. 31598620 Date 24/3/22
 Note.— To obtain a birth certificate, present this notification to the Sub-County Registrar of Births where this birth occurred